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(Red	questor's Name)	
(Add	iress)	
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COVER LETTER

TO: Amendment Section Division of Corporations

NAME OF CORPO	RATION: INVEST IN NAPL	.ES, INC			
DOCUMENT NUM	P23000031836				
The enclosed Articles	s of Amendment and fee are su	bmitted for filing.			
Please return all corre	espondence concerning this ma	tter to the following:			
	BJ Cottrell				
		Name of Contact Person			
	Cottrell Tax & Accounting, I	.LC			
		Firm/ Company			
	5633 Naples Blvd				
		Address			
	Naples, FL 34109				
	<u> </u>	City/ State and Zip Code			
	admin@cottrelltax.com				
	E-mail address: (to be us	sed for future annual report	notification)		
For further information	on concerning this matter, pleas	se call:		:	
BJ Cottrell		at (449-4881	1000 12000	2023 AUZ 14
Name	of Contact Person	Area Cod	le & Daytime Telephone Number		Pa J
Enclosed is a check for	or the following amount made	payable to the Florida Depa	rtment of State:		ų firi
\$35 Filing Fee	☐\$43.75 Filing Fee & Certificate of Status	S43.75 Filing Fee & Certified Copy (Additional copy is enclosed)	S52.50 Filing Fee Certificate of Status Certified Copy (Additional Copy is enclosed)	FATE	6 13
An Div P.C	iling Address nendment Section vision of Corporations D. Box 6327 lahassee, FL 32314	Divisior The Ce 2415 N	Address ment Section n of Corporations intre of Tallahassee f. Monroe Street, Suite 810 ssee, FL 32303		

Articles of Amendment to Articles of Incorporation of

Invest In Naples, Inc	
(Name of Corporation as currently	filed with the Florida Dept. of State)
P23000031836	
(Document Number of	Corporation (if known)
Pursuant to the provisions of section 607.1006, Florida Statutes, this <i>F</i> its Articles of Incorporation:	Torida Profit Corporation adopts the following amendment(s) to
A. If amending name, enter the new name of the corporation:	
Not Applicable	The new
name must be distinguishable and contain the word "corporation." "co" lnc.," or Co.," or the designation "Corp.," "Inc.," or "Co". A "chartered," "professional association." or the abbreviation "P.A."	ompany," or "incorporated" or the abbreviation "Corp.,"
	Not Applicable
B. Enter new principal office address, if applicable: (Principal office address MUST BE A STREET ADDRESS)	
C. Enter new mailing address, if applicable: (Mailing address MAY BE A POST OFFICE BOX)	Not Applicable
D. If amending the registered agent and/or registered office address: new registered agent and/or the new registered office address: Not Applicable	ess in Florida, enter the name of the
	1
(Florida stre	et address)
New Registered Office Address:	, Florida デス -
	City) (Zip Code)
New Registered Agent's Signature, if changing Registered Agent: I hereby accept the appointment as registered agent. I am familiar w. Signature of New Re	ith and accept the obligations of the position. gistered Agent, if changing
Check if applicable	

☐ The amendment(s) is/are being filed pursuant to s. 607.0120 (11) (c), F.S.

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change. Mike Jones leaves the corporation, Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

X Change	<u>PT</u> <u>Joh</u>	n Doe	
X Remove	<u>V</u> <u>Mil</u>	ce Jones	
X Add	<u>SV</u> <u>Sall</u>	y Smith	
Type of Action (Check One)	<u>Title</u>	<u>Name</u>	<u>Addres</u> s
1) Change	DP	Kabreca York	5045 Codar Springs Drive 201
Add			Naples, FL 34110
X Remove			
2) Change	AMBR	Kabreea York, LLC	5045 Cedar Springs Drive 201
X Add			Naples, FL 34110
Remove 3) Change	DS	Christopher Grosser	5045 Cedar Springs Drive 201
Add			Naples, FL 34110
X Remove			
4) Change	MBR	Christopher A Grosser, LLC	5045 Cedar Springs Drive 201
X Add			Naples, FL 34110
Remove			T.H.
5) Change			
Add			
Remove			
6) Change			
Add			
Remove			

Not Applicable		
	·	
	·	
. If an amendment provides for an exchange, reclassification, or cancellation of issued shares,	14 Mg	
provisions for implementing the amendment if not contained in the amendment itself:		
(if not applicable, indicate N/A)	SECULIA SECULI	
Not Applicable		
	6 4 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6 6	• • •
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date this document was signed.	option:	
Effective date <u>if applicable</u> :	(no more than 90 days after amendment file date)	
	(no more than 90 days after amendment file date)	
Note: If the date inserted in this blocument's effective date on the De	ock does not meet the applicable statutory filing requirements, this date partment of State's records.	will not be listed as t
Adoption of Amendment(s)	(<u>CHECK ONE</u>)	
☐ The amendment(s) was/were ado action was not required.	pted by the incorporators, or board of directors without shareholder action	and shareholder
The amendment(s) was/were ado by the shareholders was/were su	pted by the shareholders. The number of votes cast for the amendment(s) fficient for approval.	
☐ The amendment(s) was/were app must be separately provided for	roved by the shareholders through voting groups. The following statemen each voting group entitled to vote separately on the amendment(s):	ut
"The number of votes cast	for the amendment(s) was/were sufficient for approval	
by	(voting group)	
	(voting group)	
-1.1	n / 22	
Dated/_A	-8/23	
Signature	alrua Vol	
(By a di	rector, president or other officer - if directors or officers have not been	
	l, by an incorporator \if \(if the hands of a receiver, trustee, or other courted fiduciary by that fiduciary)	
	Vale VI	
	(Typed or printed name of person signing)	
	(Typed of printed name of person signing)	
	AMBR.	
	(Title of person signing)	
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